

Velton A. Nix

(In the space above enter the full name(s) of the plaintiff(s).)

COMPLAINT

-against-

NYPD 42<sup>nd</sup> Precinct  
P.O. Duncan Badge # 20691

Jury Trial: ☒ Yes ☐ No  
(check one)

15CV7070

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

I. Parties in this complaint:

- A. List your name, address and telephone number. If you are presently in custody, include your identification number and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff

Name

Velton Nix

Street Address

County, City

State & Zip Code

Telephone Number

- B. List all defendants. You should state the full name of the defendant, even if that defendant is a government agency, an organization, a corporation, or an individual. Include the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1

Name

Police officer Duncan Badge # 20691

Street Address

Bronx NY

County, City \_\_\_\_\_  
 State & Zip Code \_\_\_\_\_  
 Telephone Number \_\_\_\_\_

Defendant No. 2      Name \_\_\_\_\_  
                              Street Address \_\_\_\_\_  
                              County, City \_\_\_\_\_  
                              State & Zip Code \_\_\_\_\_  
                              Telephone Number \_\_\_\_\_

Defendant No. 3      Name \_\_\_\_\_  
                              Street Address \_\_\_\_\_  
                              County, City \_\_\_\_\_  
                              State & Zip Code \_\_\_\_\_  
                              Telephone Number \_\_\_\_\_

Defendant No. 4      Name \_\_\_\_\_  
                              Street Address \_\_\_\_\_  
                              County, City \_\_\_\_\_  
                              State & Zip Code \_\_\_\_\_  
                              Telephone Number \_\_\_\_\_

## II. Basis for Jurisdiction:

Federal courts are courts of limited jurisdiction. Only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case involving the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one state sues a citizen of another state and the amount in damages is more than \$75,000 is a diversity of citizenship case.

A. What is the basis for federal court jurisdiction? (*check all that apply*)

☒ Federal Questions

☐ Diversity of Citizenship

B. If the basis for jurisdiction is Federal Question, what federal Constitutional, statutory or treaty right is at issue? U.S.C. § 1331

C. If the basis for jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party?

Plaintiff(s) state(s) of citizenship \_\_\_\_\_

Defendant(s) state(s) of citizenship \_\_\_\_\_

## III. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events.

You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. Where did the events giving rise to your claim(s) occur? July 22, 2015  
3930 3rd Ave Bronx, NY 10457

B. What date and approximate time did the events giving rise to your claim(s) occur? 7/22/2015

C. Facts: I was falsely arrested and given trumped up charges, and was given a five year order of protection and ACS case.

What happened to you?

Who did what?

Was anyone else involved?

Who else saw what happened?

I call 911 to complain of a dispute me and my daughters mother was having the NYPP took a long time to come so I left to avoided any incidents The P.O. Porcan arrived with my daughter and mother took my house keys and placed me under arrest without hearing the whole story

No one

#### IV. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received.

**V. Relief:**

State what you want the Court to do for you and the amount of monetary compensation, if any, you are seeking, and the basis for such compensation.

I asking for 2 million due to  
the damage of my criminal record and having and ACS  
case because now it hard for me to get  
employment and it seperated me from my family  
(daughter)

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 8 day of September, 2015.

Signature of Plaintiff

Velfon Nix

Mailing Address

[REDACTED]

Telephone Number

[REDACTED]

Fax Number (if you have one)

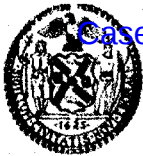
**Note:** All plaintiffs named in the caption of the complaint must date and sign the complaint. Prisoners must also provide their inmate numbers, present place of confinement, and address.

**For Prisoners:**

I declare under penalty of perjury that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, I am delivering this complaint to prison authorities to be mailed to the *Pro Se* Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff: \_\_\_\_\_

Inmate Number \_\_\_\_\_



## COMPLAINT REPORT – CIVILIAN COMPLAINT REVIEW BOARD

Instructions. You may file this report by:

- (A) Delivering it in person to the Civilian Complaint Review Board (CCRB); or
- (B) Mailing it (postage pre-paid) to the CCRB; or
- (C) Telephoning the CCRB at 1-800-341-CCRB; or
- (D) Filing it at any police precinct station house (obtain filing receipt).

1. COMPLAINANT Last Name <b>Nix</b>	First Name <b>Velton</b>	MI <b>A</b>	Home Phone [REDACTED]	Business Phone [REDACTED]
Address (Home/Business) [REDACTED] Apt. No. [REDACTED] City [REDACTED] State [REDACTED] Zip Code [REDACTED] Date of Birth [REDACTED]				
Optional/For statistical purposes only: Sex: ( <input checked="" type="checkbox"/> ) M ( ) F Race/Ethnicity: <b>Human</b>				

2. Did you witness the incident complained of? ( ☒ ) Yes ( ) No
3. If you are filing a complaint on behalf of someone else, what is your relationship, if any, to the person(s)?  
( ) Parent ( ) Spouse ( ) Relative ( ) Guardian ( ) Child ( ) Friend ( ☒ ) None ( ) Other \_\_\_\_\_
4. Please provide as much of the following information as you can about the person(s) on whose behalf the complaint is filed and any witness(es) to the incident. (Use other side of page if necessary):

a. ( <input checked="" type="checkbox"/> ) VICTIM ( ) WITNESS	Last Name <b>Nix</b>	First Name <b>Velton</b>	MI <b>A</b>	Home Phone [REDACTED]	Business Phone [REDACTED]
Address (Home/Business) [REDACTED] Apt. No. [REDACTED] City [REDACTED] State [REDACTED] Zip Code [REDACTED] Date of Birth [REDACTED]					
Optional/For statistical purposes only: Sex: ( <input checked="" type="checkbox"/> ) M ( ) F Race/Ethnicity: <b>Human</b>					

b. ( ) VICTIM ( ) WITNESS	Last Name	First Name	MI	Home Phone	Business Phone
Address (Home/Business) [REDACTED] Apt. No. [REDACTED] City [REDACTED] State [REDACTED] Zip Code [REDACTED] Date of Birth [REDACTED]					
Optional/For statistical purposes only: Sex: ( ) M ( ) F Race/Ethnicity:					

5. 11<sup>45</sup> am July 22, 2015 3930 3<sup>rd</sup> Ave Bronx, NY 10457  
Date and Time of Incident Location of Incident (Including borough)

6. Identification of police officer(s) complained of (if unknown, provide physical description of officer(s) or type of duty performed; such as dressed in uniform or in civilian clothes; foot, scooter or auto patrol; detective). Also identify officer(s) at the scene who are not complained of. (Use other side of page if necessary):

Rank	Name	Precinct/Command	Patrol Car #.	Shield #
	<b>Duncan</b>			<b>20691</b>

7. Description of the incident in as much detail as possible. (Use other side of page if necessary):

@ approximately 11:30 pm I call 911 to complain of a domestic Incident  
being that the police took a minute to show up I left to  
avoid any further conflict with daughters mother  
I came back and the officer and my daughter and her mother  
showed up I was arrested for "Criminal Mischief" and later  
charge with endangering the welfare of a child of Duncan falsified

8. I have read the foregoing complaint and the contents thereof are true to the best of my knowledge and information.

Velton Nix

COMPLAINANT'S SIGNATURE

his report and has cause major  
damage I know have a 5yr order  
protection and ACS case. 9/4/15

DATE